

Staple Issue Slip Here

UTIL  
SERIAL  
NUMBER

APPLICANTS

Form  
35 U  
Verif

ADDRESS

TITLE

PARTS  
FILED

NOTICE

Amount

POSITION	ID NO.	DATE
CLASSIFIER	5	12-23-96
EXAMINER	85	1-7-97
TYPIST	85	1-7
VERIFIER	85	1-7
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

### INDEX OF CLAIMS

Claim	Date
Final	Original
1	11/1/97
2	11/1/97
3	11/1/97
4	11/1/97
5	11/1/97
6	11/1/97
7	11/1/97
8	11/1/97
9	11/1/97
10	11/1/97
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47	11/1/97
48	11/1/97
49	11/1/97
50	11/1/97

SYMBOLS  
 ✓ Rejected  
 = Allowed  
 - (Through numeral) Canceled  
 + Restricted  
 N Non-elected  
 I Interference  
 A Appeal  
 O Objected

Claim	Date
Final	Original
51	
52	
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